IOWA DEPARTMENT OF HUMAN SERVICES

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> TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE) (MONTHLY TOTALS AS OF 11/30/10)

		(m	OMIHPA IOIMP:	2 W2 OL 11/20/10)					
						AVERAGE			
					COST PER	COST PER UN		COST PER	
CATEGORY OF SERVICE	RECIPIENTS		UNITS OF	TOTAL	UNIT OF		ECIPIENT	RECIPIENT	
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT	SERVED	SERVED	
INPATIENT	7,690	8,138	45,302	\$39,272,498.49	\$866.90	\$85.40	5.9	\$5,106.96	
OUTPATIENT	76,216	123,448	1,531,280	\$24,404,502.06	\$15.94	\$53.07	20.1	\$320.20	
CHILD PART HOSP	1	0	0	\$54.64	\$0.00	\$0.00	.0	\$54.64	
CHILD DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
ADULT PART HOSP	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
ADULT DAY TREATMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
SKILLED NURSING FACILITY	1,020	1,339	18,868	\$3,175,017.86	\$168.28	\$6.90	18.5	\$3,112.76	
INTERMEDIATE CARE FACILITY	11,561	12,219	358,191	\$42,592,493.81	\$118.91	\$92.62	31.0	\$3,684.15	
INTER CARE MENTAL RETARDA	1,647	1,725	52,072	\$15,328,286.33	\$294.37	\$33.33	31.6	\$9,306.79	
NURSING FAC FOR MENTAL ILL	24	24	716	\$148,706.24	\$207.69	\$0.64	29.8	\$6,196.09	
HOME HEALTH	14,925	20,404	316,791	\$10,847,188.77	\$34.24	\$23.59	21.2	\$726.78	
LEAD INSPECTION AGENCY	4	2	2	\$669.31	\$334.66	\$0.00	.5	\$167.33	
PHYSICIAN	147,316	329,993	455,558	\$19,720,622.80	\$43.29	\$42.88	3.1	\$133.87	
CLINIC SERVICES	26,713	38,147	36,228	\$5,103,991.42	\$140.89	\$11.10	1.4	\$191.07	
MEP CASE MANAGEMENT	. 0	. 0	· o	\$0.00	\$0.00	\$0.00	.0	\$0.00	
LAB AND RADIOLOGICAL	22,040	33,781	57,143	\$1,019,451.61	\$17.84	\$2.22	2.6	\$46.25	
HABILITATION SERVICES	3,569	6,929	111,056	\$5,777,090.11	\$52.02	\$12.56	31.1	\$1,618.69	
REMEDIAL SERVICES	11,152	17,712	369,597	\$5,635,003.67	\$15.25	\$12.25	33.1	\$505.29	
REHAB SUPPORT SERVICES	1	. 0	. 0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
AMBULANCE SERVICES	3,143	3,684	3,672	\$441,010.61	\$120.10	\$0.96	1.2	\$140.32	
LOCAL EDUCATION AGENCY	1,401	2,863	288,250	\$3,395,167.56	\$11.78	\$7.38	205.7	\$2,423.39	
EARLY ACCESS SERVICES	32	77	166	\$1,782.80	\$10.74	\$0.00	5.2	\$55.71	
PRESCRIBED DRUGS	146,997	480,363	429,230	\$24,330,963.06	\$56.69	\$52.91	2.9	\$165.52	
DRUG CAPITATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
NEMT SERVICES	361,543	367,264	367,264	\$785,944.96	\$2.14	\$1.71	1.0	\$2.17	
INDIAN HEALTH SERVICES	61	87	87	\$25,143.00	\$289.00	\$0.05	1.4	\$412.18	
FAMILY PLANNING SERVICES	8,357	9,692	9,697	\$898,151.76	\$92.62	\$1.95	1.2	\$107.47	
IOWA PLAN PROGRAM	363,055	393,238	392,948	\$11,366,885.86	\$28.93	\$24.72	1.1	\$31.31	
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
EPSDT SCREENING	5,130	5,496	5,479	\$1,240,548.22	\$226.42	\$4.87	1.1	\$241.82	
HMO SERVICES	-,	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
PACE SERVICES	85	85	85	\$254,557.00	\$2,994.79	\$0.55	1.0	\$2,994.79	
PATIENT MANAGEMENT	171,438	171,413	171,324	\$342,648.00	\$2.00	\$36.94	1.0	\$2.00	
HEALTH INS PREMIUM PAYMENT	3,427	7,776	7,776	\$443,488.77	\$57.03	\$0.96	2.3	\$129.41	
MEDICAL SUPPLIES	26,264		2,117,494	\$4,545,368.70	\$2.15	\$9.88	80.6	\$173.06	
OTHER PRACTITIONER	18,903	30,140	119,608	\$2,755,572.68	\$23.04	\$5.99	6.3	\$145.77	
FAMILY CENTERED PROGRAM	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
FAMILY PRESERVATION	0	ō	ō	\$0.00	\$0.00	\$0.00	.0	\$0.00	
TREATMENT FOSTER FAMILY CARE	0	ō	ō	\$0.00	\$0.00	\$0.00	.0	\$0.00	
GROUP TREATMENT THERAPY	0	0	ō	\$0.00	\$0.00	\$0.00	.0	\$0.00	
DENTAL	32,002	40,608	41,004	\$6,177,505.64	\$150.66	\$13.43	1.3	\$193.03	
OPTOMETRIST	14,438	17,359	18,525	\$1,016,960.26	\$54.90	\$2.21	1.3	\$70.44	
CHIROPRACTIC	10,165	19,519	23,926	\$569,654.24	\$23.81	\$1.24	2.4	\$56.04	
PODIATRIC	5,282	6,554	8,348	\$243,650.70	\$29.19	\$0.53	1.6	\$46.13	
PHYSICAL DISABILITIES SVCS	733	1,030	28,978	\$366,689.94	\$12.65	\$0.80	39.5	\$500.26	
BRAIN INJ WAIVER SERVICES	1,056	2,813	60,547	\$1,939,844.95	\$32.04	\$4.22	57.3	\$1,836.97	
PSYCHIATRIC	3,891	2,013 6,646	7,768	\$248,039.34	\$32.04 \$31.93	\$0.54	2.0	\$63.75	
RESIDENTIAL CARE FACILITY				\$386,179.82	\$8.03	\$0.34 \$0.84	31.5	\$253.23	
KENIDEMITAL CARE PACILITY	1,525	1,658	48,084	4200,179.04	90.03	90.04	31.5	9433.43	

IAMM2200-R002 (MR-0-12) AS OF 11/30/10

IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

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TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE)

(MONTHLY TOTALS AS OF 11/30/10)

					* * * * * AVERAGES * * * * * *			
					COST PER	COST PER UN:	NITS PER	COST PER
CATEGORY OF SERVICE	RECIPIENTS	NUMBER OF	UNITS OF	TOTAL	UNIT OF	ELIGIBLE RI	RECIPIENT	RECIPIENT
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT :	SERVED	SERVED
ID WAIVER SERVICE	10,308	19,795	679,152	\$27,894,123.04	\$41.07	\$2,594.08	65.9	\$2,706.07
CHILDRENS MENTAL HEALTH SVC	572	811	33,190	\$559,142.96	\$16.85	\$785.31	58.0	\$977.52
AIDS WAIVER SERVICES	43	71	3,256	\$35,710.65	\$10.97	\$850.25	75.7	\$830.48
ELDERLY WAIVER SERVICES	9,714	30,083	485,923	\$6,445,909.65	\$13.27	\$670.82	50.0	\$663.57
ILL & HANDICAPPED WAIVER SVCS	2,059	3,244	103,166	\$1,630,378.32	\$15.80	\$650.07	50.1	\$791.83
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00
MEP SERVICES	11,853	18,296	120,085	\$2,877,058.15	\$23.96	\$6.26	10.1	\$242.73
UNASSIGNED	8	0	0	\$252,860.61-	\$0.00	\$0.55-	0	\$31,607.58-
* ALL CATEGORIES *	406,558 7		8,927,836	\$273,990,797.15 REPORT ***	\$30.69	\$595.79	22.0	\$673.93
		,	*** END OF	REPORT ***				